Well Construction Report
WISCONSIN UNIQUE WELL NUMBER MO679

Drinking Water and Groundwater - DG/5
Department of Natural Resources, Box 7921
Madison WI 53707

Form 3300-077A

Property Owner: EWERT, RICHARD @ TAMMY	Phone #: (715)269-0415
Mailing Address: N2610 THUNDERCLOUD	
City: BLACK RIVER FALLS	State: WI — Zip Code: 54615
County: Jackson	Co. Permit #: — Notification #: — Completed: 09-23-1998
Well Constructor (Business Name): KLINE WELL @ PUMP INC	Lic. #: 6010 — Facility ID # (Public Wells):
Address: PO BOX 176, LOYAL WI 54446	Well Plan Approval #: — Approval Date (mm-dd-yyyy):
Hicap Permanent Well #:	Common Well #: — Specific Capacity: 1.2

1. Well Location
Town of MANCHESTER
Fire # (if avail.):
Street Address or Road Name and Number:
Subdivision Name: — Lot #: — Block #:
Latitude / Longitude in Decimal Degree (DD): °N °W — Method Code:
NE SE or Govt Lot #: — Section: 31 — Township: 20 N — Range: 3 W

2. Well Type New Well
of previous unique well #: — constructed in:
Reason for replaced or reconstructed well ?:
Construction Type: Drilled

3. Well serves 1 # of
Private,potable
Heat Exchange____# of drillholes
Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Dia. (in.)	From (ft.)	To (ft.)
6	Surface	75

Upper Enlarged Drillhole — Lower Open Bedrock

- Rotary - Mud Circulation .....
- Rotary - Air .....
- Rotary - Air & Foam .....
- Drill-Through Casing Hammer
- Reverse Rotary
- Cable-tool Bit ____in. dia...
- Dual Rotary .....
- Temp. Outer Casing ____in. dia
  - Removed? ____depth ft. (If NO explain on back side)

8. Geology

Geology Codes	Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
S	SAND	Surface	61
N	SANDSTONE	61	75

6. Casing, Liner, Screen

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
6	18 97 LB NEW STEEL ASTM A53B WELDED IBSCO	Surface	61.5
Dia. (in.)	Screen type, material & slot size	From (ft.)	To (ft.)

9. Static Water Level
4 ft. below ground surface

10. Pump Test
Pumping level 25 ft. below surface
Pumping at 25 GP M for 1 Hrs.
Pumping Method ?

11. Well Is
16 in. above grade
Developed ? Yes
Disinfected ? Yes
Capped ? Yes

7. Grout or Other Sealing Material
Method

12. Notified Owner of need to fill & seal ?
Filled & Sealed Well(s) as needed?

13. Constructor / Supervisory Driller	Lic #	Date Signed
DK		10-05-1998
Drill Rig Operator	Lic or Reg #	Date Signed
RG		10-05-1998

4a. Potential Contamination Sources Is the well located in floodplain ? No

Type	Qualifier	Distance
Building Overhang		30

Comment:

Created On: 10-28-1998 Updated On: 10-28-1998 Review Status: